Critical Time Intervention

September 12, 2012

LEARNING OBJECTIVES

- Understand the three distinct phases of CTI
- Understand the core components of CTI
- Understand how CTI is different from traditional Case Management Programs and how CTI is working in Erie County

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WHY IS ERIE COUNTY FOCUSING ON TRANSITIONS?

SOME OF THE PROBLEMS

- transitions (homeless to housed, hospitals to community, prison to community or from fragmented care to integrated care) can be difficult
- persons can easily fall between the cracks without support (especially from one system to another)
- many individuals don't know how to access community services
- it is costly for persons to be using emergency services when they can be set up to effective community services to get their needs met

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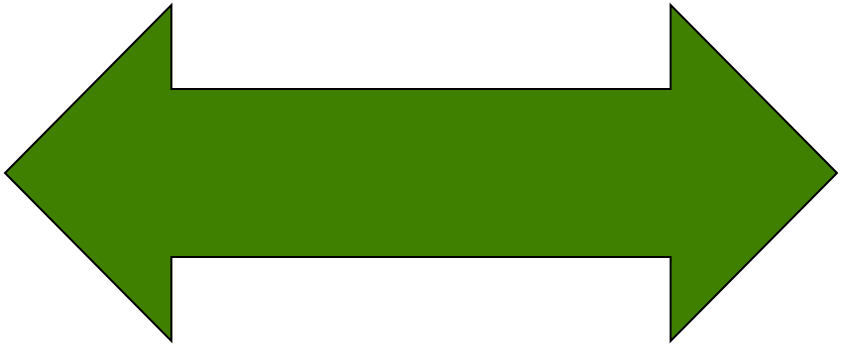
CTI **BRIDGES** THE GAP

Shelter

Prison

Hosp.

Trans.



CRITICAL TIME INTERVENTION

- Critical Time Intervention (CTI) is specialized intervention provided at a "critical time" [from institutional to community care]
- CTI connects people with formal and informal community supports in this critical period
- CTI is a time-limited intervention (6 months for the Erie County Model), divided into 3 specific phases that focuses on a limited number of focus areas that promote community stability
- CTI is a well-researched and cost effective Evidence Based Practice (EBP) proven to assist people with mental illness with transitions

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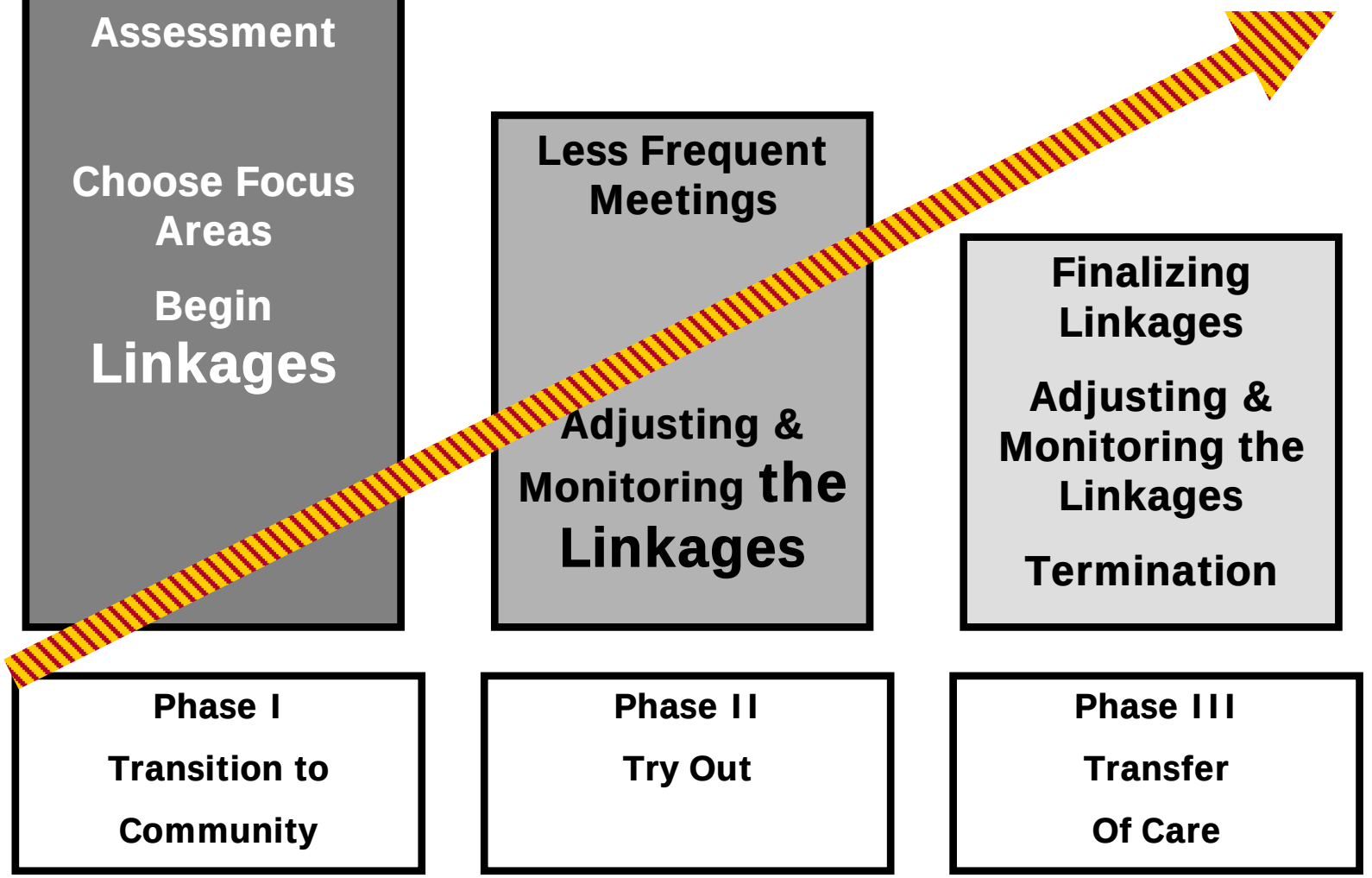
DIAGRAM OF CTI

6 MONTH PERIOD OF TIME



OVERARCHING TASKS OF EACH PHASE

PHASE I: TRANSITION TO THE COMMUNITY

- engagement/assessment of client and developing linkages

PHASE II: TRY OUT

- developing linkages, negotiating, mediating

PHASE III: TRANSFER OF CARE

- solidifying and terminating

CTI Care Coordinators continue to engage, assess, negotiate and link to services throughout phases ending in termination w/client

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How Do You Access CTI?

CTI Starts with the Single Point of Access

CTI access starts with a referral to the Adult Single Point of ACCESS (SPOA). The SPOA evaluates referrals to CTI based on the following questions:

- Is the person high risk?
- Is the person undergoing a transition?
- Are there supports that need to be in functioning in order to help address the person's risks?
- The SPOA referral website is https://familyfirst.secure.force.com/spoa/apex/spoa2_home

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CTI Overview

CRITICAL TIME INTERVENTION (CTI)

- CTI is an intervention that assists persons in their transition from homeless shelters, psychiatric hospitals or the criminal justice system into the community or from fragmented care to integrated care
- transitional care coordination is provided to clients starting when the person is assigned to the CTI Care Coordinator's caseload
- is a time-limited intervention lasting 6 months, divided into 3 specific phases that focuses on a limited number of focus areas to promote a successful transition

CTI APPROACH

Critical Time Intervention is focused on:

- strengthening community linkages
- limiting areas of focus to 2-3 areas essential to making the transition successful
- gradually transferring care from CTI Care Coordinator to community

Presents an alternative to the traditional case management approach of building skills, by instead linking the person to community supports that can do so.

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GOAL OF CTI

The principle goal of CTI is to ensure successful transitions and prevent re-institutionalization, recurrent homelessness and other adverse outcomes during the period following placement into the community from shelters, hospitals, correctional facilities and other institutions.

CTI does this in two main ways:

- by strengthening the individual's long-term ties to community services, family, and friends
- by providing emotional and practical support during the critical time of transition

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CTI CORE PRINCIPLES

- Time-limited around a transition period
- identify and strengthen community support so that these supports can continue once the CTI intervention ends
- work with existing services – don't duplicate

WHAT IS THE "CRITICAL TIME"?

"Critical Time" is when an adult transitions to community living. At this time, clients can fall through the cracks, but also this time creates a "window of opportunity":

- typically categorized by energy & renewed sense of hope
- person is more amenable to trying new things
- barriers to community stability can be identified and removed
- opportunity to start establishing life-long connections to the community

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CTI CHARACTERISTICS

- is time limited [6 months]
- occurs in 3 phases w/decreasing services intensity over time
- focused on a few areas of focus at one time
- maintains small caseloads
- team based [weekly team supervision w/case reviews]
- utilizes community linkages
- Uses a harm-reduction and motivational interviewing approach to behavior change
- no drop-out policy

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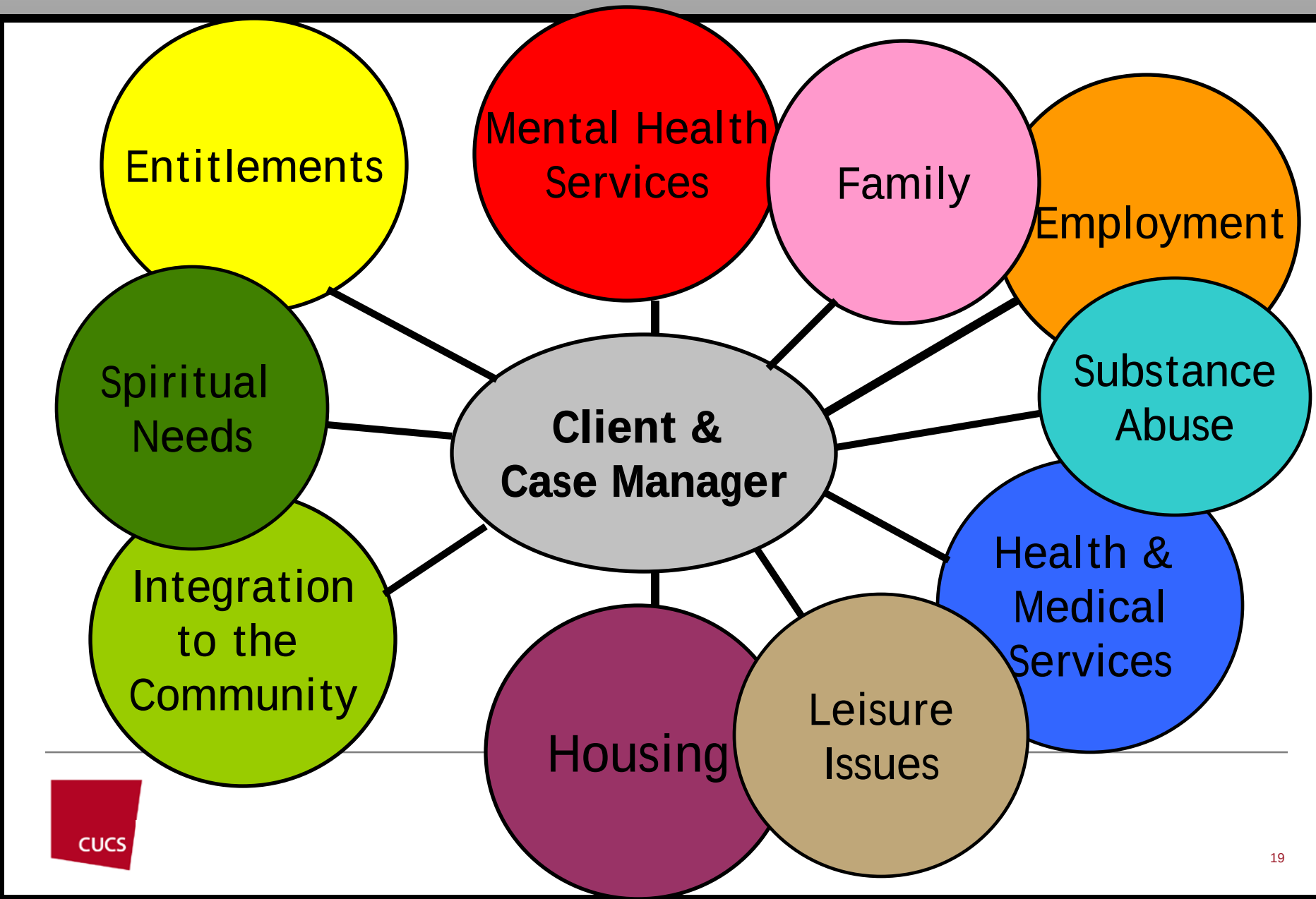
SEVEN FOCUS AREAS

NON-CTI FOCUSED ROLE OF THE CASE MANAGER

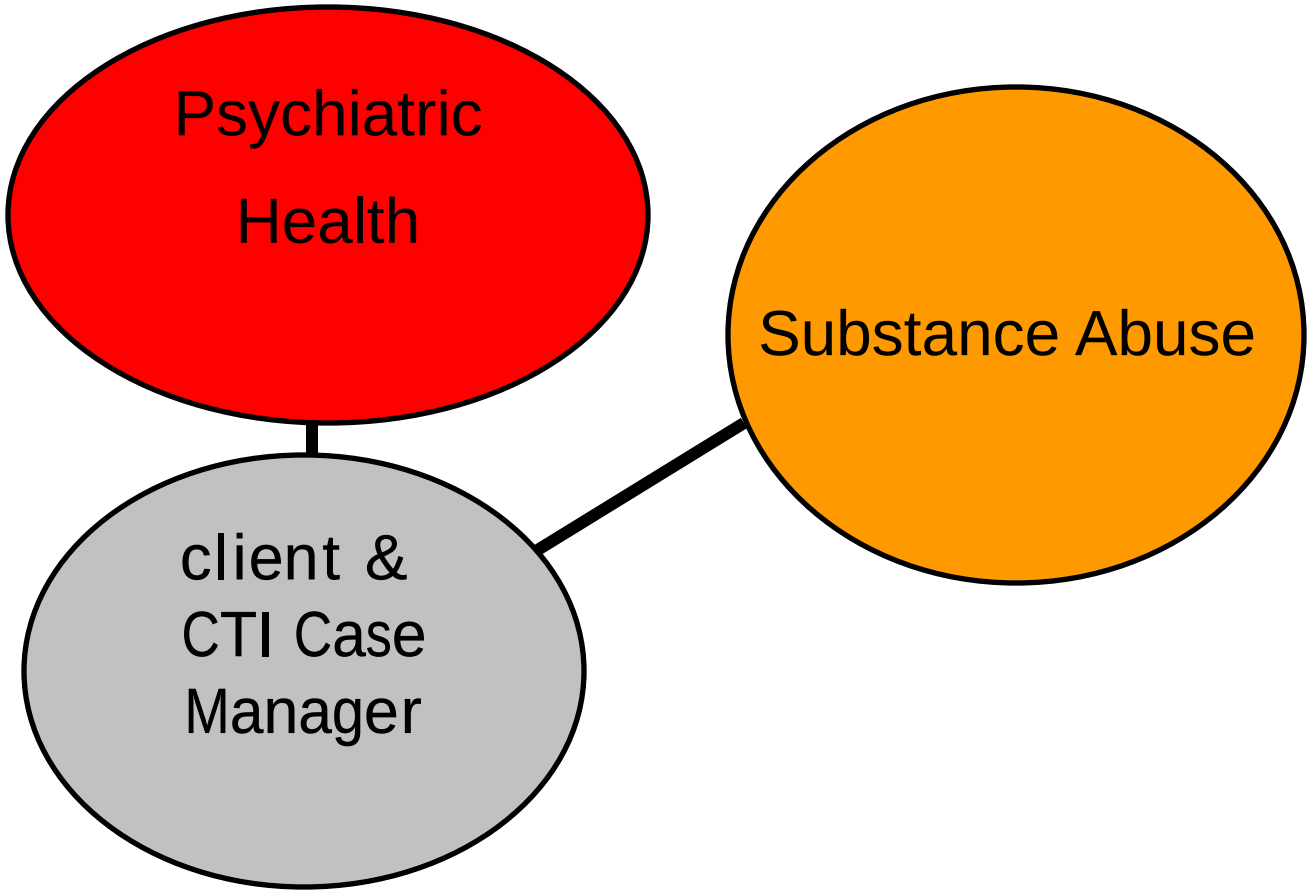


7 FOCUS AREAS

CTI Care Coordinator & client choose only a couple to work on to help ensure a successful transition:

- **Housing and Housing Crisis Management**
- **Psychiatric Treatment & Medication Management**
- **Financial**
- **Medical Treatment**
- **Substance Abuse Treatment**
- **Social Support**
- **Legal**

CTI FOCUSED ROLE OF THE Care Coordinator



AREAS OF TREATMENT OUTSIDE THE FOCUS?

The CTI worker Coordinator handles any crises until he/she able to transfer them to the appropriate person or agency in the community

3 PHASES of CRITICAL TIME INTERVENTION

PHASE I: TRANSITION TO THE COMMUNITY

Time Frame: Months 1-2

- begins day of discharge from institution and/or first day of transition to community

This is most intense period *of CTI* where bulk of the work is:

- engaging client
- addressing crises
- assessing for potential long-term support systems
- goal setting
- beginning linking with formal and informal supports

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PHASE I: TRANSITION TO THE COMMUNITY cont.

CTI Care Coordinator Role:

- engage client
- develop CTI Plan based on no more than three of the 7 focus areas
- meet with community caregivers
- assess potential long-term support systems
- provide direct service as needed

PHASE II: TRY-OUT

Time Frame: Months 3-4

- meet less frequent with client while testing how linkages made in Phase I are working

CTI Care Coordinator Role:

- adjust systems of support for the client
- monitor effectiveness of supports & intervening as needed

Try-Out phase is about adjusting systems of support for client & locating gaps in services that need further adjustment

Often involves negotiation and mediation

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PHASE III: TRANSFER OF CARE

Time Frame: Months 5-6

The final phase focuses on ***completing transfer of care*** to community resources providing long-term support to person. Work leading up to transfer has been done throughout the previous phases

CTI Care Coordinator Role:

- monitor & fine tuning systems that have been established
- finalizing long-term supports
- transfer care (includes final transfer of care meetings w/client and all primary supports)
- terminate from client (includes a final meeting)

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CTI Research

Fort Washington Armory
Susser, Valencia, et. al. 1997

Design

- randomized trial
- 9-month intervention/ 18-month follow-up
- n=100

Results

- 3-fold reduction in risk of homelessness
- Effect persisted beyond 9 months

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US Veterans Homelessness Program

Kasprow et. al., 2009

Design

- “effectiveness” trial
- non-randomized pre-post design
- men & women with SMI following hospital care

  multiple sites nationally
- n=484

Results

- 19% more days housed over one year
- lower drug, alcohol & psychiatric problems

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CTI in the Transition from Hospital to Community

Design

- randomized trial
- homelessness primary outcome
- 9-month intervention / 18-month follow-up
- 150 men & women with SMI following discharge

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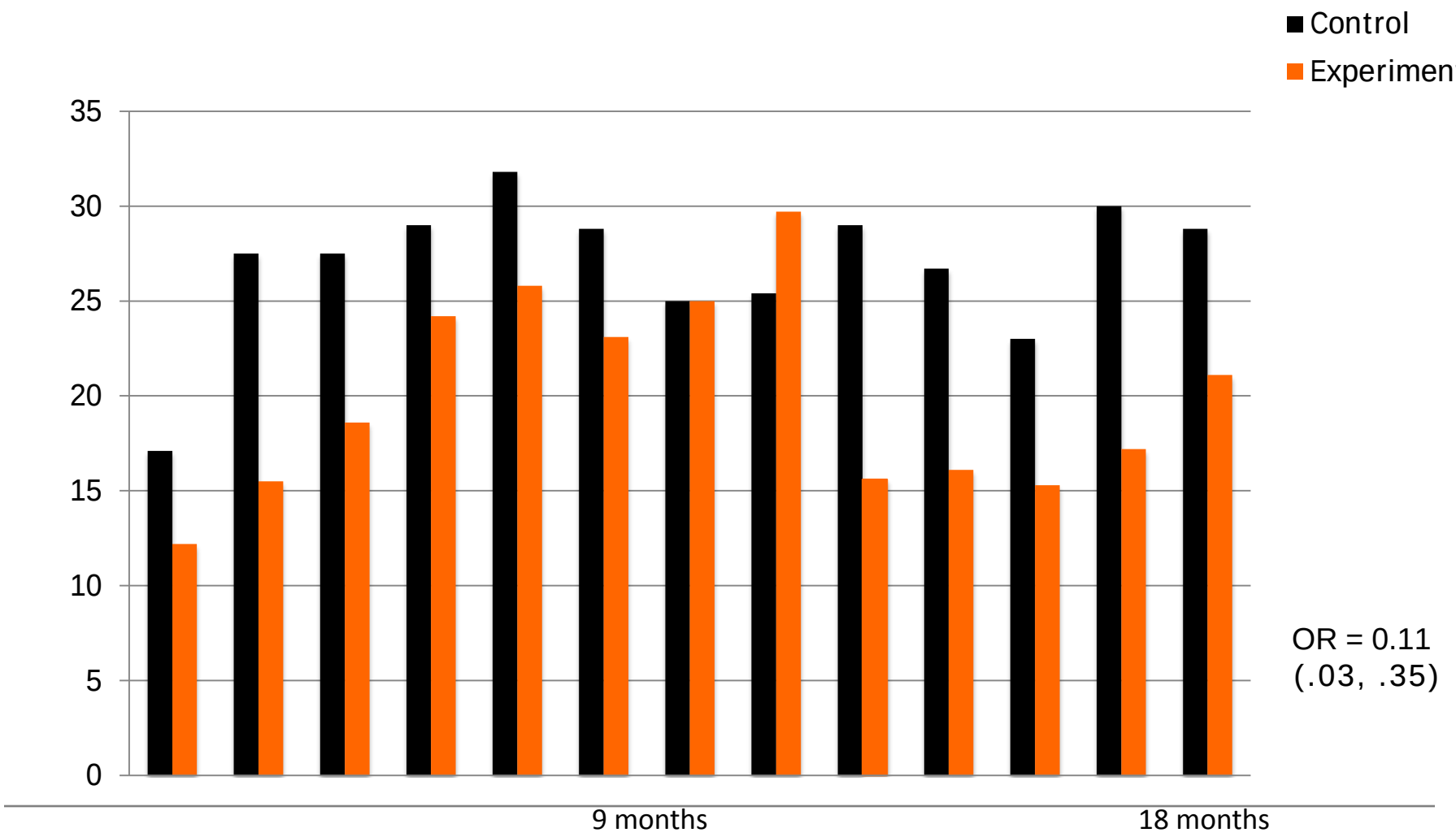
Percent of subjects who were hospitalized over follow-up period



EVIDENCE BASED PRACTICE

- is tested with SCIENTIFIC METHODS
- is shown to be SAFE
- is proven EFFECTIVE
- is employed in a REPLICABLE STANDARDIZED MANNER
- outcomes are MEASURABLE AND UNDERSTANDABLE

CTI IS AN EVIDENCE BASED PRACTICE

- CTI has been recognized an Evidence-Based Practice by both the federal Substance Abuse and Mental Heath Services Administration (SAMHSA) and the President's New Freedom Commission on Mental Health [2008]
- http://nrepp.samhsa.gov/index.htm
- http://www.criticaltime.org/

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Thank you

Center for Urban Community Services

Erie County Department of Mental Health